FAX NO. 8602860115

JAN 1 7 2007

PART B - FEE(S) TRANSMITTAL

ld this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Complete and & TRADEMARK

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FIEL (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 23413

10/23/2006

CANTOR COLBURN, LLP 55 GRIFFIN ROAD SOUTH BLOOMFIELD, CT 06002

01/18/2007 TTRAN2 00000068 502513 09368201

01 FC:1501

1400.00 DA

300.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Malling or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Patricia Di	regorio	(Depositor's name)
Chitera	Dix Ocazio	(Signature)
January 17,	2007	(Date)
	- mmo man av avec ov 1970 by o	COMPRESENTATION NO

02 FC:1	1504 300.00	DA	January 17,	2007	
	APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	00.0749.201	09/04/1000	HEROME KNOPLIOCH	14XZ00047/GEM-0275	5267

TIFLE OF INVENTION: METHOD OF SEMIAUTOMATIC SEGMENTATION FOR THE ESTIMATION OF THREE-DIMENSIONAL VOI UMES

APPLN, TYPE	SMALL ENTITY	ISSUE FIRE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE PEE	TOTAL FEE(S) DUE	DATEDUIC	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/23/2007	
ĿXAN	MINER	ART UNIT	CLASS-SUBCLASS]			
JONES,	цион М	2128	703-002000			<u>. </u>	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form P1O/SB/122) attached. XX "Fee Address" indication (or "Fee Address" Indication form PTO/SB/17; Rev 03 02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the putent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Up recordation as set for	ntess an assignee is iden (th in 37 CFR 3.11. Com	A TO BE PRINTED ON tified below, no assigned pletion of this form is NC	THE PATENT (print or ty data will appear on the p off a substitute for filing an	pe) intent. If an assignee is in assignment. If and STATE OR COUN	dentified below, the de	eument has been filed for	
(A) NAME OF ASS GE Medic	igner al Systems SA		France	and STATE ON COOK	*		
Please check the approp	onate assigned caregory o	or entegories (will not be p	orinted on the patent):	Individual XX Corporal	tion or other private gro	up entity U Government	
	c) are submitted: (No small emity discount # of Copies	permitted)	tb. Payment of Fee(s): (Pie A check is enclosed. Payment by credit or KYThe Director is hereb overpayment, to Dep	ırd. Form PTO-2038 is att	pehed.	shown above) Deiency, or credit ony n extra copy of this form).	
n Amilicant clai	tatus (from status indicat ims SMALL, ENTITY sta	tus. See 37 CFR 1.27.	☐ b. Applicant is no lo	nger clauning SMALL EN	NTITY status. See 37 Cl	FR 1.27(g)(2).	
NOTE: The Issue Fee a interest as shown by th	and Publication Fee (if re e records of the Anited S	quired) will not be accept tates Patent and Tradema	ed from anyone other than rk Office.	the applicant; a registered	i auomey or agent; or tr	ie assignee or other party in	
Anthorized Signatu		· · · · · · · · · · · · · · · · · · ·		Date January			
Typed or printed na	sean F. S	ullivan		Registration No.			
30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the second section 17	CER 1 211 The information	tion is required to obtain or	retain a benefit by the ou	blic which is to file (an	d by the USP1O to process	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USP1O to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or surgestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FILES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.